

BOOK REVIEW

RICHARD P. WEDEEN: *Poison in the Pot: The Legacy of Lead*. Carbondale and Edwardsville, Ill., Southern Illinois University Press, 1984, pp. xi, 274.

BECAUSE lead is easily extracted from ore, worked and shaped, and is highly resistant to corrosion, it was one of the most useful metals in antiquity. The Egyptians called lead the mother of metals, and believed that copper, iron, tin and silver were derived from it. Over the centuries, civilized man unknowingly risked insidious poisoning from lead-laden products ubiquitous in his environment, e.g., cosmetics, paints, glazed earthenware, cooking utensils, wine, solder, water pipes and cisterns.

In addition, saturnine medicinals were available too, having been used sporadically until the 16th century when Paracelsus reintroduced them into the *materia medica* for the treatment of wounds and ulcers. Later Boerhaave advised lead salts for scirrhus cancers and, in the New World, Rush championed similar preparations for epilepsy in children. Others treated dropsy, hemorrhage and diarrhea in like fashion. After Sir George Baker's pioneering studies (1767) proved that the Devonshire colic was a manifestation of plumbism, it became evident that "common wisdom mistook the cause for the cure." Today, lead is the only early-known heavy metal that does not have some therapeutic application.

Dr. Wedeen became interested in the history of chronic lead toxicity through his research into occupational lead nephropathy. He brings to this subject a rare combination of an impressive store of historical learning and an active researcher's grasp of the very latest scientific knowledge. The result is a rewarding book documenting the evolution of our understanding of the biological and social effects of long-term exposure to lead.

While colic, palsy, encephalopathy and gout are skillfully portrayed as "the hoofbeats of lead," the most original and provocative chapters in the book deal with lead nephropathy. In 1839 Pierre Rayer, Charcot's mentor, published the first description of the gouty kidney, a modern interpretation of which is consistent with advanced interstitial nephritis. Since then, renal disease has been viewed as a natural consequence of gout and the principal cause of death among podagric patients. In contrast, Dr. Wedeen contends that the underlying cause of the interstitial nephritis associated with gout is unrecognized lead toxicity and not hyperuricemia. Although most convincingly de-

veloped, the issue remains controversial. Authoritative texts such as Brenner and Rector's *The Kidney* (1981) still proclaim that gouty nephropathy is a sequel to hyperuricemia.

More than 800 references, chiefly to primary sources, will satisfy scholars wishing to explore various aspects of the subject in greater detail. The illustrations are aptly chosen, nicely reproduced and add a delightful dimension to the book.

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